

AUG. 24. 2006 4:26PM

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NO. 432

P. 1

MORRISON | FOERSTER425 MARKET STREET
SAN FRANCISCO
CALIFORNIA 94105-2482TELEPHONE: 415.268.7000
FACSIMILE: 415.268.7522

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MORRISON & FOERSTER LLP
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DENVER, NORTHERN VIRGINIA,
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AUG 24 2006

To:

NAME:	FACSIMILE:	TELEPHONE:
Centralized Facsimile Center US Patent and Trademark Office	571-273-8300	

FROM: Robert E. Scheid

DATE:

Number of pages with cover page:	13	Originals Will Not Follow
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Attorney Docket No.: 495812004800
Group Art Unit: 2611
Examiner: Not Yet Assigned
Application No.: 10/757,855
Filed: January 14, 2004
Title: SUPPLEMENTAL MEMORY HAVING MEDIA DIRECTORY
Inventor: Tod EARTHART

Enclosed are the following documents:

1. Transmittal, 1 page
2. Fee transmittal in duplicate, 2 pages
3. Supplemental Notice Of Change Of Status And Payment Of Deficiency Owed Under 37 CFR 1.28(c), 3 pages
4. COPIES of Notice Of Change Of Status And Payment Of Deficiency Owed Under 37 CFR 1.28(c) submitted on August 10, 2006, 6 pages

Comments:

IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL
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SF-2183201

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NO. 432

P. 2

AUG 24 2006

PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>		Application Number	10/757,855
		Filing Date	January 14, 2004
		First Named Inventor	Tod EARHART
		Art Unit	2611
		Examiner Name	Not Yet Assigned
Total Number of Pages In This Submission	12	Attorney Docket Number	495812004800

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form in duplicate, 2 pgs. <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Supplemental Notice of Change of Status and Payment of Deficiency Owed under 37 CFR §1.28(c), 3 pgs.; COPIES of Notice of Change of Status and Payment of Deficiency Owed under 37 CFR §1.28(c) filed 08/10/06, 8 pages
Remarks Facsimile cover sheet is the uncounted page in this transmission.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP (Customer No. 20872)		
Signature			
Printed name	Robert E. Scheld		
Date	8/23/06	Reg. No.	42,128

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: 8-24-06 Signature: Vicki Henry (Vicki Henry)

sf-2183199

AUG 24 2006

PTO/SS/17 (01-06)

Approved for use through 7/31/2006. OMB 0851-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL For FY 2006		Complete if Known	
		Application Number	10/757,855
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	January 14, 2004
		First Named Inventor	Tod EARHART
TOTAL AMOUNT OF PAYMENT (\$) 210.00		Examiner Name	Not Yet Assigned
		Art Unit	2611
		Attorney Docket No.	495812004800

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Deposit Account	<input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):
Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison & Foerster LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description							Small Entity Fee (\$)
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
=		x	=		Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
=		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequences or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 =	/50	(round up to a whole number) x	=				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge):							210.00
Deficiency payment - change of status							

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	42,128
Name (Print/Type)	Robert E. Scheid	Telephone	(415) 268-6369
		Date	8/23/06

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.	
Dated: <u>8-24-06</u>	Signature: <u>Vicki Henry</u> (Vicki Henry)

sf-2183200

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AUG 24 2006

Docket No.: 495812004800
(PATENT)

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: 8-24-06

Signature: Vicki Henry

(Vicki Henry)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Tod BARHART

Application No.: 10/757,855

Filed: January 14, 2004

Art Unit: 2611

For: SUPPLEMENTAL MEMORY HAVING MEDIA
DIRECTORY

Examiner: Not Yet Assigned

**SUPPLEMENTAL NOTICE OF CHANGE OF STATUS AND PAYMENT
OF DEFICIENCY OWED UNDER 37 CFR 1.28(C)**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant submitted a Notice of Change of Status and Payment of Deficiency Owed on August 10, 2006, (copy attached) and miscalculated the deficient fees owed to the Patent Office. In the original Notice, Applicant read the United States Patent and Trademark FY 2006 Fee Schedule incorrectly and used \$790.00 as the current base filing fee instead of \$1000.00 as the current base filing fee in its itemization of fees owed. Therefore, Applicant under-calculated the deficient fees owed by \$210.00.

As required under 37 C.F.R. §1.28(c), to correct this oversight and in order for the error in payments to be excused we hereby submit an itemization of the erroneous small entity payment and the differential fee, together with the deficiency payment.

sf-2183198

Application No.: 10/757,855

2

Docket No.: 495812004800

Itemization of all erroneous small entity payments and the differential fees:

Type of Fee	Small Entity Fee Paid on 01/14/04	Incorrect Large Entity Fee on Notice Dated 08/10/2006	Large Entity Differential Fee on Notice Dated 08/10/2006	Correct Current Large Entity Fee	Large Entity Differential Fee Currently Due
FILING FEE	\$385.00	\$790.00	\$405.00	1,000.00	210.00
					CORRECTED FEE AMOUNT TO BE CHARGED TO DEPOSIT ACCOUNT No. 03-1952

As shown in the above table, Applicant paid a small-entity filing fee of \$385.00 on January 14, 2004. Then on August 10, 2006, Applicant filed a Notice of Change of Status and Payment of Deficiency Owed and authorized the Commissioner to charge \$405.00, which was an incorrect calculation of the differential fee. Applicant is now filing this Supplemental Notice to authorize an additional charge of \$210.00 in order to correct the differential fee owed in light of the fact that the correct current filing fee is \$1000.00 (i.e., $\$385.00 + \$405.00 + \$210.00 = \$1,000.00$).

Applicant hereby acknowledges the miscalculation as a good faith error and requests and authorizes the Commissioner to charge the differential fee of \$210.00 from our Deposit Account No. 03-1952 (referencing docket no. 495812004800).

Pursuant to 37 C.F.R. § 1.28(c), the calculated deficient "large entity fees" are based upon the amount of the fee in effect at the time the deficiency is paid in full.

In the event the Patent Office determines that an extension and/or other relief is required, Applicant petitions for any required relief including extensions of time and authorizes the

sf-2183198

Application No.: 10/757,855

3

Docket No.: 495812004800

Commissioner to charge the cost of such petitions and/or other fees due in connection with the filing of this document to **Deposit Account No. 03-1952** (referencing docket no. **495812004800**).

Dated: 8/23/06

Respectfully submitted,

By 

Robert E. Scheid

Registration No.: 42,126

MORRISON & FOERSTER LLP

425 Market Street

San Francisco, California 94105-2482

(415) 268-6369

sf-2183198

MORRISON | FOERSTER425 MARKET STREET
SAN FRANCISCO
CALIFORNIA 94105-2482TELEPHONE: 415.268.7000
FACSIMILE: 415.268.7522

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MORRISON & FOERSTER LLP
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NAME: Centralized Facsimile Center US Patent and Trademark Office	FACSIMILE: 571-273-8300	TELEPHONE:
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FROM: Robert E. Scheid**DATE:** 8-10-06

Number of pages with cover page:	6	Originals Will Not Follow
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Attorney Docket No.: 495812004800
Group Art Unit: 2611
Examiner: Not Yet Assigned
Application No.: 10/757,855
Filed: January 14, 2004
Title: SUPPLEMENTAL MEMORY HAVING MEDIA DIRECTORY
Inventor: Tod EARTHART

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2. Fee transmittal in duplicate, 2 pages
3. Notice Of Change Of Status And Payment Of Deficiency Owed Under 37 CFR 1.28(c), 2 pages

Comments:

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SF-2167344

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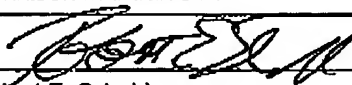
PTO/SB/21 (09-04)

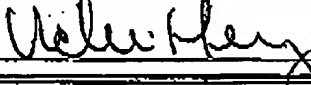
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/757,855
		Filing Date	January 14, 2004
		First Named Inventor	Tod EARHART
		Art Unit	2611
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	5	Attorney Docket Number	495812004800

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form in duplicate, 2 pgs. <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Notice of Change of Status and Payment of Deficiency Owed under 37 CFR §1.28(c), 2 pgs.
Remarks Facsimile cover sheet is the uncounted page in this transmission.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 20872)		
Signature			
Printed name	Robert E. Scheid		
Date	8/14/06	Reg. No.	42,126

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Date: 8-10-06	Signature:  (Vicki Henry)

sf-2155370

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PTO/SB/17 (01-05)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL For FY 2006		Complete if Known	
		Application Number	10/757,855
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	January 14, 2004
		First Named Inventor	Tod EARTHART
		Examiner Name	Not Yet Assigned
		Art Unit	2611
TOTAL AMOUNT OF PAYMENT		(\$)	1085.00
		Attorney Docket No.	495812004800

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METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description							Small Entity Fee (\$)
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
=		x	=		Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
=		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 =	/ 50	(round up to a whole number) x	=				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							Fee Paid (\$)
Other (e.g., late filing surcharge): Deficiency payment - change of status							1085.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	42,126
Name (Print/Type)	Robert E. Schaid	Telephone	(415) 268-6369
		Date	8/09/06

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Dated: 8-10-06	Signature: (Vicki Henry)

sf-2155371

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL For FY 2006		Complete if Known	
		Application Number	10/757,855
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	January 14, 2004
		First Named Inventor	Tod EARTHART
		Examiner Name	Not Yet Assigned
TOTAL AMOUNT OF PAYMENT		(\$)	1085.00
		Attorney Docket No.	495812004800

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METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

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Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description							Small Entity
Each claim over 20 (including Reissues)							Fee (\$)
Each independent claim over 3 (including Reissues)							Fee (\$)
Multiple dependent claims							Fee (\$)
Total Claims Extra Claims Fee (\$) HP = highest number of total claims paid for, if greater than 20.							Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3.
3. APPLICATION SIZE FEE							
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Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
- 100 =		/50	(round up to a whole number) x				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							Fee Paid (\$)
Other (e.g., late filing surcharge): Deficiency payment - change of status							1085.00

SUBMITTED BY			
Signature	<i>Robert E. Scheld</i>	Registration No. (Attorney/Agent)	42,126
Name (Print/Type)	Robert E. Scheld	Telephone	(415) 288-8369
		Date	8/09/06

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.	
Dated: 8-10-06	Signature: <i>Vicki Henry</i> (Vicki Henry)

sf-2155371

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I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: 8-10-06Signature: Vicki Henry
(Vicki Henry)Docket No.: 495812004800
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Tod EARHART

Application No.: 10/757,855

Filed: January 14, 2004

Art Unit: 2611

For: SUPPLEMENTAL MEMORY HAVING MEDIA
DIRECTORY

Examiner: Not Yet Assigned

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AUG 24 2006

**NOTICE OF CHANGE OF STATUS AND PAYMENT OF DEFICIENCY
OWED UNDER 37 CFR 1.28(C)**Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

It has recently come to our attention that a good faith error appears to have been made regarding the entity status of the above-referenced application and that some fee payments appear to have been made in error claiming small entity discount.

As required under 37 C.F.R. §1.28(c), to correct these oversights and in order for the error in payments to be excused we hereby submit an itemization of all erroneous small entity payments and the differential fees, together with the deficiency payment.

sf-2150925

Application No.: 10/757,855

COPY

Docket No.: 495812004800

Itemization of all erroneous small entity payments and the differential fees:

TYPE OF FEE	DATE PAID	SMALL ENTITY FEE PAID	CURRENT FEE AMOUNT	LARGE ENTITY DIFFERENTIAL FEE
FILING FEE	1/14/04	\$385.00	\$790.00	\$405.00
15 EXTRA CLAIMS	1/14/04	\$135.00	\$750.00	\$615.00
LATE OATH OR DECLARATION FEE	6/9/04	\$65.00	\$130.00	\$65.00
TOTALS		\$585.00 (TOTAL FEES PREVIOUSLY PAID)	\$1,670.00 (CURRENT FEE AMOUNT)	\$1085.00 (CORRECTED FEE AMOUNT TO BE CHARGED TO DEPOSIT ACCOUNT NO. 03-1952)

Based upon the above, Applicant believes the differential between the small entity fees previously paid and the large entity fees now owing should total \$1085.00. Applicant requests this *differential fee* be paid from our Deposit Account No. 03-1952. Pursuant to 37 C.F.R. § 1.28(c), the calculated deficient "large entity fees" are based upon the amount of the fee in effect at the time the deficiency is paid in full.

In the event the Patent Office determines that an extension and/or other relief is required, Applicant petitions for any required relief including extensions of time and authorizes the Commissioner to charge the cost of such petitions and/or other fees due in connection with the filing of this document to Deposit Account No. 03-1952 referencing docket no. 495812004800.

Dated: 8/4/06

Respectfully submitted,

By 

Robert E. Scheid

Registration No.: 42,126

MORRISON & FOERSTER LLP

425 Market Street

San Francisco, California 94105-2482

(415) 268-6369

sf:2150925

DUPLICATE COPY FOR FEE PROCESSING

PTO/SB/17 (01-08)
Approved for use through 7/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT		(\$) 210.00	
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Complete If Known

Application Number	10/757,855
Filing Date	January 14, 2004
First Named Inventor	Tod EARHART
Examiner Name	Not Yet Assigned
Art Unit	2611
Attorney Docket No.	495812004800

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METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims = Extra Claims x Fee (\$) = Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims = Extra Claims x Fee (\$) = Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
100	0	0	0	0

4. OTHER FEE(S)

Other (e.g., late filing surcharge):	Deficiency payment - change of status	Fees Paid (\$)
		210.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	42,126	Telephone	(415) 268-8369
Name (Print/Type)	Robert E. Scheid	Date	8/23/06		

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 279-8300, on the date shown below.

Dated: 8-24-06 Signature: Vicki Henry (Vicki Henry)

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